

**DIVORCE COMPLAINT  
(DISSOLUTION OF MARRIAGE)**

JD-FM-159 Rev. 6-03  
C.G.S. § 46b-40, et seq., P.B. § 25-2, et seq.

STATE OF CONNECTICUT  
**SUPERIOR COURT**

[www.jud.state.ct.us](http://www.jud.state.ct.us)

CROSS COMPLAINT CODE ONLY  
**CRSCMP**

- ☐ **Complaint:** Complete this form. Attach a completed Summons (JD-FM-3) and Notice of Automatic Court Orders (JD-FM-158).
- ☐ **Amended Complaint.**
- ☐ **Cross Complaint:** Complete this form and attach to the Answer (JD-FM-160) unless it is already filed.

JUDICIAL DISTRICT OF	AT (Town)	RETURN DATE (Month, day, year)	DOCKET NO.
PLAINTIFF'S NAME (Last, First, Middle Initial)		DEFENDANT'S NAME (Last, First, Middle Initial)	
1. WIFE'S BIRTH NAME (First, Middle Initial, Last)			
2. DATE OF MARRIAGE		3. TOWN AND STATE, OR COUNTRY WHERE MARRIAGE TOOK PLACE	

4. (Check all that apply)

- ☐ The husband or the wife has lived in Connecticut for at least twelve months before the filing of this divorce complaint or before the divorce will become final.
- ☐ The husband or the wife lived in Connecticut at the time of the marriage, moved away, and then returned to Connecticut, planning to live here permanently.
- ☐ The marriage broke down after the wife or the husband moved to Connecticut.

5. A divorce is being sought because: (Check all that apply)

- ☐ This marriage has broken down irretrievably and there is no possibility of getting back together. **(No fault divorce)**
- ☐ Other (must be reason(s) listed in Connecticut General Statute § 46b-40(c)):


Check and complete all that apply for items 6-13. Attach additional sheets if needed.

6. ☐ No children were born to the wife after the date of this marriage.
7. ☐ There are no minor children of this marriage.
8. ☐ The following children have been born to the wife or have been adopted before, on or after the date of this marriage and the husband is the father/adoptive father. (List only children who have not yet reached the age of 23.)

NAME OF CHILD (First, Middle Initial, Last)	DATE OF BIRTH (Month, day, year)

9. ☐ The following children were born to the wife **after** the date of the marriage and the husband is **not the father**. (List only children who have not yet reached the age of 23.)

NAME OF CHILD (First, Middle Initial, Last)	DATE OF BIRTH (Month, day, year)

(Continued...)

10. ☐ The wife is pregnant with a child due to be born on (date) \_\_\_\_\_

The father of this unborn child is (check one) ☐ the husband ☐ not the husband ☐ unknown.

11. If there is a court order about any child listed above, name the child(ren) below and the person or agency awarded custody or providing support:

CHILD'S NAME	NAME OF PERSON OR AGENCY
CHILD'S NAME	NAME OF PERSON OR AGENCY
CHILD'S NAME	NAME OF PERSON OR AGENCY

12. The husband, the wife, or any of the child(ren) listed above has received financial support from the State of Connecticut. (Check one) ☐ Yes ☐ No ☐ Do not know

If yes, send a copy of the Summons, Complaint, Notice of Automatic Court Orders and any other documents filed with this Complaint to the Assistant Attorney General, 55 Elm Street, Hartford, CT 06106, and file the Certification of Notice (JD-FM-175) with the court clerk.

13. The husband, the wife, or any of the child(ren) listed above has received financial support from a city or town in Connecticut. (Check one) ☐ Yes (State city or town: \_\_\_\_\_) ☐ No ☐ Do not know

If yes, send a copy of the Summons, Complaint, Notice of Automatic Court Orders and any other documents filed with this Complaint to the City Clerk of the town providing assistance and file the Certification of Notice (JD-FM-175) with the court clerk.

**The Court is asked to order: (Check all that apply)**

☐ A divorce (dissolution of marriage).

☐ Visitation.

☐ A fair division of property and debts.

☐ Name change to: \_\_\_\_\_

☐ Alimony.

☐ Sole custody.

☐ Child Support.

☐ Joint legal custody, Primary residence with: \_\_\_\_\_

☐ An order for the post-majority educational support of the child(ren) pursuant to C.G.S. § 46b-56c.

**And anything else the Court thinks is fair.**

SIGNATURE	PRINT NAME OF PERSON SIGNING	DATE SIGNED
ADDRESS	JURIS NO. (If applicable)	TELEPHONE (Area code first)

• If this is a Complaint, attach a copy of the Automatic Court Orders before serving a copy on the Defendant.

• If this is an Amended Complaint or a Cross Complaint, you must mail or deliver a copy to anyone who has filed an appearance and you must complete the certification below.

I certify that a copy of the above was mailed/delivered to all counsel and pro se parties of record on:

DATE MAILED OR DELIVERED	SIGNED (Attorney or pro se party)
NAME OF EACH PERSON SERVED*	ADDRESS WHERE SERVICE WAS MADE (No., street, town, zip code)*

\*If necessary, attach additional sheet with name of each party served and the address at which service was made.